

# Network Notification – Humana Healthy Horizons in Kentucky

Notice date: March 27, 2023

To: Humana Healthy Horizons® in Kentucky Provider Network

From: Humana Healthy Horizons in Kentucky
Subject: Humana Coverage Policy Updates

## **Humana Coverage Policy Update Notification**

Humana Healthy Horizons® in Kentucky is giving notice of the following clinical coverage policies that have been updated by Humana's policy team. These policies have been reviewed and approved by the Kentucky Medicaid Utilization Management Committee.

#### **Updated Humana Coverage Policies - Effective Date: 05/01/2023**

- Airway Clearance Devices 03/01/2023
- Bariatric Surgery 03/01/2023
- Durable Medical Equipment 02/02/2023
- Emerging Tumor Markers for Diagnosis and Monitoring of Cancer 02/02/2023
- Genetic and Coagulation Testing for Non-Cancer Blood Disorders 02/02/2023
- Genetic Testing 03/01/2023
- Genetic Testing for Cancer Susceptibility 02/02/2023
- Genetic Testing for Carrier Screening 12/08/2023 (Reviewed and no changes to policy coverage)
- Genetic Testing for Celiac Disease 02/02/2023 (Reviewed and no changes to policy coverage)
- Genetic Testing for Diagnosis of Noncancer Indications 12/08/2023
- Genetic Testing for Marfan Syndrome and Related Conditions 03/01/2023
- Hammer Toe Surgical Treatments 02/02/2023
- Implantable and Non-Implantable Hearing Devices 02/02/2023
- Inhaled Nitric Oxide 12/08/2023
- Molecular Diagnostic Assays and Breath Testing for Transplant Rejection 03/01/2023 (Reviewed and no changes to policy coverage)
- Molecular Markers in Fine Needle Aspirates of Thyroid Nodules 03/01/2023
- Noninvasive Prenatal Screening Testing 12/08/2023
- Noninvasive Tests for Hepatic Fibrosis 02/02/2023
- Orthotics 03/01/2023
- Pharmacogenomics and Companion Diagnostics 03/01/2023
- Prophylactic Mastectomy 02/02/2023
- Sleep Studies, Adults 02/02/2023
- Whole Genome/Exome Sequencing and Genome-Wide Association Studies 03/01/2023 (Reviewed and no changes to policy coverage)

Humana Healthy Horizons in Kentucky is a Medicaid product of Humana Health Plan Inc.

#### **Updated Humana Coverage Policies - Effective Date: 06/01/2023**

• Durable Medical Equipment 06/01/2023

#### Kentucky Medicaid Retired Humana Coverage Policies – Not applicable

### Newly approved Humana Coverage Policies - Effective Date: 05/01/2023

- Lymphedema Diagnosis & Treatment 03/24/2022
- Multiplex Pathogen Testing and Next-Generation Sequencing for Infectious Disease 12/08/2022
- Pneumatic Compression Pumps 04/28/2022
- Continuous Passive Motion and Mechanical Stretching Devices 02/02/2023

If you have questions about the updated policy list, please email our Provider Relations staff at **KYMCDPR@Humana.com** or call Provider Services at **800-444-9137**, Monday – Friday, 8 a.m. to 6 p.m., Eastern time.

Thank you for the continued care of your Humana Healthy Horizons in Kentucky-covered patients.